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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10802631

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	OTHER THAN	
			(Column 1)		(Column 2)		[.]	TYPE		OR	SMALL		
TOTAL CLAIMS			50					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			50 minus 20=		• 30			X\$ 9=	270.	OR	X\$18=		
IND	DEPENDENT C	LAIMS	minus 3 =		*			X43=	US.	OR	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter					"0" in c	column 2		TOTAL	698	OR	TOTAL		
	C	LAIMS AS A				_	OTHER	THAN					
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	inte		=		X\$ 9=	·	OR	X\$18=		
	Independent	*	Minus	***	CLAIM	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
										OR	TOTAL ADDIT. FEE		
ADDIT. FEE (Column 1) (Column 2) (Column 3)											ADDII. FEEI		
-	· · · · · · · · · · · · · · · · · · ·	CLAIMS		HIGHE		(Column 5)	lr		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AINA	= .	lſ	X43=	,	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
	\	CLAIMS		HIGHE		(Column 5)	ı	<u>-</u>	ADDI		<u> </u>	ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT	·	NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	7.10-		OR			
	, , ,		+145=		OR	+290=							
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT, FEE		
		mber Previously Pa ber Previously Paid						DDIT. FEE L d in the appr	opriate box		•	, :	